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APPLICANTS

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*CS 8/4*

\*\* CONTINUING DATA \*\*\*\*\*

*NONE 8/4*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*NONE 8/4*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/07/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY ISRAEL	SHEETS DRAWING 5	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 5
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35 USC 119 (a-d) conditions met  
☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged

*[Signature]*  
 Examiner's Signature Initials

ADDRESS

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TITLE

Robust low complexity multi-antenna adaptive minimum mean square error equalizer

FILING FEE  RECEIVED 1088	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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